



11-08-09

Atty. Dkt. No. 041673-2115

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Tuszynski, Mark H.

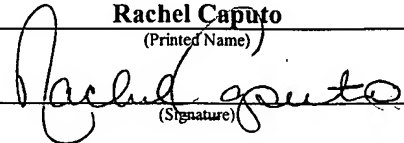
Title: METHODS FOR THERAPY OF
NEURODEGENERATIVE
DISEASE OF THE BRAIN

Appl. No.: 10/748,337

Filing Date: 12/29/2003

Examiner: Lieto, Louis D.

Art Unit: 1632

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
EV 727838415 US	11/08/2005
(Express Mail Label Number)	(Date of Deposit)
Rachel Caputo	
(Printed Name)	
	
(Signature)	

AMENDMENT TRANSMITTALMail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is the following:

☒ Amendment and Reply Under 37 CFR 1.116, including:

PTO Form SB/08 (with 2 refs);

Terminal Disclaimer;

Copy of Supplemental IDS filed 7/19/05;

Copy of PTO-1449 filed 7/19/05; and

Copy of PTO-stamped postcard.

☒ The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	15	-	20	=	0	x	\$50.00	=	\$0.00

Independent Claims:	1	-	3	=	0	x	\$200.00	=	\$0.00
First presentation of any Multiple Dependent Claims:	+						\$360.00	=	\$0.00
CLAIMS FEE TOTAL	=							=	\$0.00

[X] The Commissioner is hereby authorized to charge any fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 11-8-2005

By Stacy L. Taylor

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